PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number 10/532103

CLAIMS AS FILED - PART I (Column 1) (Column 2)					(Column 2)		SMALL ENT		OR	OTHER THAN SMALL ENTITY	
U.S. NATIONAL STAGE FEES			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			7	RATE	FEE		RATE	FEE
BASIC FEE			SMALL ENT. = \$ 15	O LAR	GE ENT. = \$ 300	1	BASIC FEE	150	OR	BASIC FEE	
ÉXAMINATION FEE			Satisfies PCT Article 33 (4) = \$50 / \$100		ther situations = 100 / \$ 200	1	EXAM. FEE	100		EXAM FEE	
SEARCH FEE			U.S. is ISA = \$50/\$ ALL other countries \$ 200/\$ 400	୍ଥା ଯୋଗ	ther situations = 3 250 / \$ 600		SEARCH FEE	a00		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			minus 10) =	/ 50 =		X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			4 minus 20)=.			X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			2 minus:	3=.			X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPEN	DENT CLAIM PRE	SENT				+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	450	OR	TOTAL	٠
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OR	OTHER SMALL E	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT	, N	IGHEST LUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	:- 4	Minus ** 2	4	= /		X \$ 25 =		OR	X \$ 50 =	
	Independent	. 2	Minus ***	2	•/		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180 =		OR	+ \$ 360 =	
							TOTAL ADDIT.	•	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											
2	٠	CLAIMS REMAINING AFTER AMENDMENT	H N PRE	GHEST UMBER EVIOUSLY ND FOR	PRESENT EXTRA	,	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 4	Minus **	20	5		X \$ 25 =		OR	X \$ 50 =	
	Independent	.2	Minus	3	9		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	ENTATION OF MU	ILTIPLE DEPENDEN	IT CLAIM			+ \$ 180 =		OR	+ \$ 360 =	
	•		•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE				
					•			•			. [
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

FORM PTO-875 (Rev. 02/2005)

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